

Policy Summary

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This policy summary is designed to provide you with the key information about the Healthplan. It does not however provide you with the full Terms and Conditions, these can be found in the Policy Document.

This Healthplan is provided by Simplyhealth Access.

What is a Healthplan?

This Healthplan provides insurance against the costs of dental and optical healthcare, complementary therapies and consultations. Additionally, payments are made following hospital stays, and there's also a lump sum payable on the birth or adoption of a child. Members of the Healthplan also receive access to a number of valuable helplines.

Premiums

Details of premium levels are shown within this document. Premiums include Insurance Premium Tax. We review premiums periodically, but we'll give you notice of any changes we have to make as per the period stated in the policy document.

Features, benefits, exclusions and limitations

For all elements of cover (except hospital stays and maternity cover) you are reimbursed a proportion of the costs incurred, up to an annual limit. For hospital stays, benefit payments are made based on the number of days / nights spent in hospital, up to an annual limit. Set sums are paid on the birth or adoption of a child.

You can claim against your HSA cover immediately, except for maternity cover for which a 10-month qualifying period applies.

You will not be entitled to claim for hospital in-patient stays if they are related to a pre-existing condition you had prior to joining the Healthplan. Please refer to section 3.8 in the Policy Document for full details.

You must be aged between 18 and 59 and a permanent UK resident to join the Healthplan. You may include your partner on the Healthplan (thereby agreeing to pay the appropriate increased premium to cover him / her). You may also apply to include your children at no extra cost.

Duration

Cover under this Healthplan is monthly and continues from month to month until it is cancelled or otherwise comes to an end.

Keep us informed

In order that your cover remains appropriate for your needs, you should review it regularly and inform us of any significant changes to your healthcare requirements.

Changing your mind

You have 14 days from receipt of your new member welcome pack in which to change your mind and receive a full refund from HSA, provided no claims have been made. After this period our standard cancellation rights apply, please refer to section 4 in the Policy Document for full details. If you change your mind and wish to cancel please call 0800 072 1000 or write to: Customer Services, HSA, Hambleden House, Andover, Hampshire SP10 1LQ

How to claim

HSA provides claim forms for all new members in the new member welcome pack. Following any claim, a new form will be automatically sent to you. Alternatively, claim forms can be requested by calling 0800 072 1000, by visiting www.hsa.co.uk, or by writing to: Customer Services, HSA, Hambleden House, Andover, Hampshire SP10 1LQ.

All relevant receipts should be provided with a claim. Claims will then be processed within a few days and payments are made by cheque or direct into your bank account.

Please refer to section 3 in the Policy Document for full details of how to claim.

If you have a complaint

At HSA we aim to provide you with the very highest levels of customer service and care at all times. In order to maintain this service standard, we encourage feedback from our members and have put in place a procedure that you can use to raise any concern or complaint that you may have. In the first instance you should write to: Customer Services, HSA, Hambleden House, Andover, Hampshire SP10 1LQ or contact customer services direct on 0800 072 1000.

If you are unhappy with the response you receive then we will refer your complaint to the Simplyhealth Group Quality Assurance team for a final decision. Should you remain dissatisfied with our final response you have the right to refer your complaint to the Financial Ombudsman Service.

Please refer to section 5.1 in the Policy Document for full details.

You are protected by the Financial Services Compensation Scheme

In the unlikely event that we go out of business or into liquidation, you are protected by the Financial Services Compensation Scheme. Please refer to section 5.5 in the Policy Document for full details.